#### O I P PATENT APPLICATION



### ATTORNEY DOCKET NO. OMT-1RIA

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next the property of the state of the st

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Absorbent Materials with Covalently-Bonded, Nonleachable, Polymeric Antimicrobial Surfaces, and Methods for Preparation the specification of which is attached hereto unless the following box is checked:

( ) was filed on \_\_\_\_\_ as US Application Serial No. or PCT International Application Number \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose all information which is material to patentability as defined in 37 CFR 1.56.

#### Foreign Application(s) and/or Claim of Foreign Priority

I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below and have also identified below any foreign application for patent or inventor(s) certificate having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
			YES: NO:
			YES: NO:

**Provisional Application** 

I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below:

APPLICATION SERIAL NUMBER	FILING DATE	

**U.S. Priority Claim** 

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION SERIAL NUMBER	FILING DATE	STATUS(patented/pending/abandoned)
09/857,906	6/9/2001	Pending

#### POWER OF ATTORNEY:

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) listed below to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Timothy H. Van Dyke, Reg. No. 43218

Send Correspondence to:	Direct Telephone Calls To:	
Timothy H. Van Dyke Van Dyke & Associates, P.A. 1630 Hillcrest Street Orlando, Florida 32803	Timothy H. Van Dyke 407-228-0328	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

of the 18 of the Office States code and that such white false statements may	copulative the validity of the approximent of any parent issued diction.
Full Name of Inventor: Christopher D. Batich	Citizenship: USA
Residence: Gainesville, Florida	
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Chi Bahil	2-13-02
Inventor's Cignoture	Date

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)	ATTORNEY DOCKET NO. OMT-1RIA		
Full Name of Inventor: Gregory Schultz	Citizenship: USA		
Residence: Gainesville, Florida			
Post Office Address: 1600 SW Archer Road, Gainesville, FL 32610-0294  Inventor's Signature	1-30-02 Date		
Full Name of Inventor: Bruce A. Mast	Citizenship: <u>USA</u>		
Residence: Gainesville, Florida			
Post Office Address: 832 NW 45th Tegrace, Gainesville, FL 32605  Inventor's Signature	3/18/32 Date		
Full Name of Inventor: Gerald M. Olderman	Citizenship: <u>USA</u>		
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Post Office Address: 4632 SW 47 <sup>th</sup> Way, Gainesville, Florida 32608			
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Full Name of Inventor:	Citizenship:		
Residence:			
Post Office Address:			

Inventor's Signature

Date

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# DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)



### ATTORNEY DOCKET NO. OMT-1RIA

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Post Office Address: 832 NW 45th Terrace, Gainesville, FL 32605				
Inventor's Signature	Date			
Full Name of Inventor: Gerald M. Olderman		Citizenship: USA		
Residence: New Bedford, MA				
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11 000000000000000000000000000000000000	M = 16	2.001		
Merald M. Olderman Inventor's Signature	Date	Mov 6, 2001 Date		
Full Name of Inventor: <u>David S. Lerner</u>		Citizenship: <u>USA</u>		
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Post Office Address: 401 NE 25 <sup>th</sup> Terrace, Boca Raton, FL 33431				
Inventor's Signature	Date			
Full Name of Inventor: William Toreki		Citizenship: <u>USA</u>		
Residence: Gainesville, Florida				
Post Office Address: 4632 SW 47 <sup>th</sup> Way, Gainesville, Florida 32608				
Inventor's Signature	Date			
Full Name of Inventor:		Citizenship:		
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Inventor's Signature	Date			

# DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)



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# DECLARATION AND POWER QF ATTORNEY FOR PATENT APPLICATION (continued)

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Full Name of Inventor: William Toreki		Citizenship: <u>USA</u>
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